PTO/SB/22 (11-07)
Approved for use through 11/30/2007. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application Number 10/779,696 Filed 02/18/2004 For Apparatus for Generating Shock Waves Examiner KHOLDEBARIN, Iman This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee Small Entity	PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 69643.001500		
Art Unit 3737 Examiner KHOLDEBARIN, Iman This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee Small Entity Fee One month (37 CFR 1.17(a)(1)) \$120 \$60 \$60 Two months (37 CFR 1.17(a)(2)) \$460 \$230 \$	Application Number 10/779,696		Filed 02/18/2004		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filling a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee Small Entity Fee	For Apparatus for Generating Shock Waves				
application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee Small Entity Fee	Art Unit 3737	Examiner KI-	Examiner KHOLDEBARIN, Iman		
Notember 12, 2007 Signatures of all the limetrics of a Registration Number 50, 2006 Second of the entire interest of their representative(s) are required. Submit multiple forms if	application.				
Notember 12, 2007 Signatures of all the limetrics of a Registration Number 50, 2006 Second of the entire interest of their representative(s) are required. Submit multiple forms if	Fee Small Entity Fee				
Three months (37 CFR 1.17(a)(3)) \$1050 \$525 \$	One month (37 CFR 1.17(a)(1))				
Four months (37 CFR 1.17(a)(4)) \$1640 \$820 \$	☐ Two months (37 CFR 1.17(a)(2))	\$460	\$230	\$	
Five months (37 CFR 1.17(a)(5)) \$2230 \$1115 \$	☐ Three months (37 CFR 1.17(a)(3))	\$1050	\$525	\$	
A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-0206. I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card Information and authorization on PTO-2038. I am the	Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$	
A check in the amount of the fee is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director has already been authorized to charge fees in this application to a Deposit Account. ☐ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-0206. I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the ☐ applicant/inventor. ☐ assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). ☐ attorney or agent of record. Registration Number 55,574 ☐ attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. November 12, 2007 Signature Date Deidra P. Ritcherson (404) 888-4060 Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if	Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$	
□ assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). □ attorney or agent of record. Registration Number 55,574 □ attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. November 12, 2007 Signature Date Deidra D. Ritcherson Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if	 □ Payment by credit card. Form PTO-2038 is attached. □ The Director has already been authorized to charge fees in this application to a Deposit Account. □ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-0206. I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on 				
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Attorney or agent of record. Registration Number 55,574 attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. November 12, 2007 Signature Date Deidra D. Ritcherson Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if	I am the applicant/inventor.				
attorney or agent of record. Registration Number 55,574 attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. November 12, 2007 Signature Date Deidra D. Ritcherson Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if	-				
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. November 12, 2007 Signature Deidra D. Ritcherson Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if	<u> </u>				
Registration number if acting under 37 CFR 1.34 November 12, 2007 Signature Date Deidra D. Ritcherson (404) 888-4060 Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if					
November 12, 2007 Signature Deidra D. Ritcherson Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if					
Deidra D. Ritcherson (404) 888-4060 Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if	November 12, 2007				
Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if		-			
more than one signature is required, see below.	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if				
Total of forms are submitted.					

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETEDFORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.